

Work Order ID 95010

95010

Page 1

January-02-13 11:50:14 AM

Item ID: D350-748-201

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Crosstube Installation, High Aft

Start Date: 1/21/13 Start Qty: 1.00

1

Cust Item ID:

Required Date: 1/21/13 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals: Process Plan: MLJ

Date: 13-01-03 Tooling:

Date:

QC:

Date:

SPC (Y/N):

Date:

Run Start *NR1*

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp Stamp
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Draw Nbr	Revision Nbr
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D350-748-241	G
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100

0.00

100

DOCUMENT CONTROL

DC

Memo

0.00

Document Control

Photocopy bluefile & type labels per PPPD350-748-201

CHG003

AS 06 9-89 1368 12

110

0.00

110

BENDING MACHINE - CROSSTUBES

CNC Bend 2

Memo

0.00

CNC Alpha 160 Bender

Bend tube as per Dwg D350-748-241 using CNC bender program D350A and Folio FT

*****UNDER BEND .225" PER SIDE*****

USE (4) DT9824 SHIM BLOC TO CHECK STRAIGHTNESS

13-3-7

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <table style="width:100%; border: none;"> <tr> <td style="width:25%;">Skid-tube <input type="checkbox"/></td> <td style="width:25%;">Crosstube <input type="checkbox"/></td> <td style="width:25%;">Water Jet <input type="checkbox"/></td> <td style="width:25%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>						Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
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Work Order ID 95010

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Page 2

January-02-13 11:50:14 AM

Item ID: D350-748-201

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Crosstube Installation, High Aft

Start Date: 1/21/13 Start Qty: 1.00 *1*

Cust Item ID:

Required Date: 1/21/13 Req'd Qty: 1.00 *1*

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start *NR1*

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
120 *120* QC Quality Control	QC15- Crosstube Dimensional Check Memo ****USE (4) DT9824 SHIM BLOC TO CHECK STRAIGHTNESS****	0.00 0.00							
125 *125* HandFXtube Hand Finishing Crosstubes	QC15- Crosstube Dimensional Check Memo ***Stress relief*** Heat treat crosstube as per QSI010 4.3 Temp: _____ Start time: _____ Finish time: _____	0.00 0.00							
127 *127* QC Quality Control	QC15- Crosstube Dimensional Check Memo	0.00 0.00							

#128

cut cull3 at FAI sheet height
verbi height 31.400"
verbi thrust 0.005"
activation
QC15 inspects.

DAS
16
9-80

13/3/14

13-03-13

CX 13/03/08 ①

13/3/14

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <table style="width:100%; border: none;"> <tr> <td style="width: 25%;">Skid-tube <input type="checkbox"/></td> <td style="width: 25%;">Crosstube <input type="checkbox"/></td> <td style="width: 25%;">Water Jet <input type="checkbox"/></td> <td style="width: 25%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>						Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
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FAULT CATEGORY											
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Work Order ID 95010

95010

Page 3

January-02-13 11:50:14 AM

Item ID: D350-748-201

Accept

N9000040100

Setup Start *NS1*

Revision ID:

Item Name: Crosstube Installation, High Aft

Stop *NS2*

Start Date: 1/21/13 Start Qty: 1.00 *1*

Cust Item ID:

Required Date: 1/21/13 Req'd Qty: 1.00 *1*

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start *NR1*

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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130

0.00

130

Crosstubes

0.00

Crosstubes

Memo

1-Drill Tube as per Dwg D350-748-241 Using DT8876 Drill Jigs,
Set-up drill table as per QSI 010

2-Deburr

3-Engrave Part # and Batch # as per Dwg D350-748-241

4-Remove all marks from tube within limits of D350-748-241

5- Apply a light coat of LPS3 on the interior of tube

Batch: _____

0.00

140

QC6- Inspect dimensions to drawing

0.00

140

QC

Memo

Quality Control

(DAS 16 9-89) 13/03/18

13-03-15

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>									
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Doc/Data <input type="checkbox"/>															
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Work Order ID 95010

95010

Page 4

January-02-13 11:50:14 AM

Item ID: D350-748-201

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Crosstube Installation, High Aft

Start Date: 1/21/13 Start Qty: 1.00 *1*

Cust Item ID:

Required Date: 1/21/13 Req'd Qty: 1.00 *1*

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start *NR1*

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
150	Outsource process-Cadplate per QSI017 4.1.9.1	0.00							
150									
Outsource3	Memo	0.00							
Outsource process - Cad plate	Issue P/O: <u>19388</u> Stress relief at 375° for 5 hours Magnetic Particle Inspect per ASTM E1444 Cadium Plate per AMS-QQ-P-416B, Class 1, Type 2 Embrittle relief at 375° for 8 hours, Chromate Treat Possible Supplier: Southwest United Industries Ensure Certificate of Conformity is attached								
160	Receive & Inspect for Damage & Mat'l Certs	0.00							
160									
Packaging	Memo	0.00							
Packaging	Ensure certificate of conformity is attached								
170	QC5- Inspect part completeness to step on W/O	0.00							
170									
QC	Memo	0.00							
Quality Control									

CA 13/03/21 ①
 PO 19712 8/13-04-26
 P/O: 19783 CA 13/05/03 ①
 13/07/16 ②
 1X
 SP
 13-411

DAS
16
13/04/14

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>						
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Doc/Data <input type="checkbox"/>												
Equip/Tooling <input type="checkbox"/>												
Operator <input type="checkbox"/>												
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Work Order ID 95010

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Page 5

January-02-13 11:50:14 AM

Item ID: D350-748-201

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Crosstube Installation, High Aft

Start Date: 1/21/13 Start Qty: 1.00 *1*

Cust Item ID:

Required Date: 1/21/13 Req'd Qty: 1.00 *1*

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start *NR1*

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
172		0.00							
172									
Crosstubes	Memo	0.00							
Crosstubes	***LOAD TEST TO 3000LB FOR 1 MINUTE***								
174		0.00							
174									
Outsource2	Memo	0.00							
Outsource process - NDT									
176		0.00							
176									
Packaging	Memo	0.00							
Packaging									

13-4-12
P13/4/12

1
13/05/16

P/O: 19585
P/O: 19926

CL 13/04/15 ①
CL 13/05/17 ①

13/4/16 ①
13/4/26 ①

NCR: Yes / No

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FAULT CATEGORY																											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other																		

Work Order ID 95010

95010

Page 6

January-02-13 11:50:14 AM

Item ID: D350-748-201

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Crosstube Installation, High Aft

Start Date: 1/21/13 Start Qty: 1.00 *1*

Cust Item ID:

Required Date: 1/21/13 Req'd Qty: 1.00 *1*

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start *NR1*

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
178	QC5- Inspect part completeness to step on W/O	0.00							
178									DAS 05 13-05-18
QC	Memo	0.00							
Quality Control									
180		0.00							
180	SprayPaint								
SprayPaint	Memo	0.00							
Spray Painting	1-Prime inside crosstube as per QSI 005 4.2 2-Paint Outside of Tube as per Dart QSI 005 4.2 125473								12-05-19
190	QC14- Inspect Spray Paint	0.00							
190									
QC	Memo	0.00							
Quality Control	Then, Wrap in plastic bag to protect from scratches								

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Work Order ID 95010

95010

Page 7

January-02-13 11:50:14 AM

Item ID: D350-748-201

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Crosstube Installation, High Aft

Start Date: 1/21/13 Start Qty: 1.00 *1*

Cust Item ID:

Required Date: 1/21/13 Req'd Qty: 1.00 *1*

Customer:

Reference:

Approvals: Process Plan: Date: Tooling: Date:

Run Start *NR1*

QC: Date: SPC (Y/N): Date:

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
200	Crosstubes	0.00							
200									
Crosstubes	Memo	0.00							
Crosstubes	1-Install Ground wire Insert, then insert screw and washer								
	2-Abrade mating surfaces of support and crosstube with 400 grit sandpaper, clean the area with 4105S wash 'n' wipe								
	3-Install supports with Proseal 890 per and QSI 015 A/R Proseal 890 Batch: 124856								
	4-Install supports clamps Using Dt8876 as per Dwg D350-748-241, Torque to 60-80 IN-LBS								
210	QC5- Inspect part completeness to step on W/O	0.00							
210	inspected only after 72 hours								
QC	Memo	0.00							
Quality Control	all assembly								

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Work Order ID 95010

95010

Page 8

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Item ID: D350-748-201

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Crosstube Installation, High Aft

Start Date: 1/21/13 Start Qty: 1.00 *1*

Cust Item ID:

Required Date: 1/21/13 Req'd Qty: 1.00 *1*

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start *NR1*

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
220	Pick Kit	0.00							
220									
Packaging	Memo	0.00							
Packaging									
230	QC4- 100% Inspect kits for completeness	0.00							
230									
QC	Memo	0.00							
Quality Control									
240		0.00							
240	Packaging								
Packaging	Memo	0.00							
Packaging	Identify and pack for shipping as per PPPD350-748-201								
	Location: _____								
	PPP Rev: _____								

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Work Order ID 95010

95010

Page 9

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Item ID: D350-748-201

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Crosstube Installation, High Aft

Start Date: 1/21/13 Start Qty: 1.00 *1*

Cust Item ID:

Required Date: 1/21/13 Req'd Qty: 1.00 *1*

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start *NR1*

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop *NR2*

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

250

QC21- Final Inspection - Work Order Release

0.00

250

QC

Memo

0.00

Quality Control

11-5 13-05-31

u PB-05-31

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>						
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector			
Doc/Data <input type="checkbox"/>												
Equip/Tooling <input type="checkbox"/>												
Operator <input type="checkbox"/>												
Material <input type="checkbox"/>												
Setup <input type="checkbox"/>												
Other <input type="checkbox"/>												
Process <input type="checkbox"/>												
Supplier <input type="checkbox"/>												
Training <input type="checkbox"/>												
Unapproved <input type="checkbox"/>												
FAULT CATEGORY												
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

Picklist Print

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Page 1

Work Order ID: 95010

Parent Item: D350-748-201

Parent Item Name: Crosstube Installation, High Aft

Start Date: 1/21/13

Required Date: 1/21/13

Start Qty: 1.00

Required Qty: 1.00

Comments:

IPP Rev: A New Issue 06-07-05 JLM

IPP Rev: B Update qty of MS21042L5 06-09-12 KJ

IPP Rev C Combined manufacturing 08.04.02 EC verified by: DD

IPP Rev:D 08-06-24 revD as per dwg DD verified by:EC

IPP Rev: E 08.12.11 Step17 was step 21 KJ Verified by:EC IPP Rev:F 10.08.04 added QSI010

4.3 DD verf:EC IPP REV:G ADD UNDER BEND COMMENT 12-05-28 JLM IPP

REV:H 12.11.05 as per dwg D350-748-141G DD verf:JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
ALS4-1032-225 Insert		Purchased	No			200	Each	1,476.0000	1	1	AB	13-5-22	

Location

Loc Qty

Loc Code

FP001

1476

118386

55

118966

68

120410

10

120451

13

121269

77

122290

253

122827

1000

Purchased

No

220

Each

404.0000

Location

Loc Qty

Loc Code

ST359

73

123346

73

ST515

331

120423

150

121185

181

Purchased

No

220

Each

3,808.0000

Location

Loc Qty

Loc Code

ST355

324

123355

324

ST514

3484

123355

3484

AN4-41A
Bolt

AN4-6A
Bolt

13-05/27

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%; border: none;"> <tr> <td style="width: 25%;">Skid-tube <input type="checkbox"/></td> <td style="width: 25%;">Crosstube <input type="checkbox"/></td> <td style="width: 25%;">Water Jet <input type="checkbox"/></td> <td style="width: 25%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Picklist Print

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Page 2

Work Order ID: 95010

Parent Item: D350-748-201

Parent Item Name: Crosstube Installation, High Aft

Start Date: 1/21/13

Required Date: 1/21/13

Start Qty: 1.00

Required Qty: 1.00

AN5-32A Bolt Purchased No 220 Each 3.0000

Location	Loc Qty	Loc Code
ST337	3	
123831	3	

124936 M.L.D.

AN960JD10 Washer Purchased No 124392 200 Each 0.0000

AN960JD416 Washer Purchased No 124392 220 Each 0.0000

AN960JD516 Washer Purchased No 220 Each 2.0000

Location	Loc Qty	Loc Code
ST504	2	
1069059	2	

123248 M.L.D.

D3500-1 Saddle Manufactured No 220 Each 99.0000

Location	Loc Qty	Loc Code
ST423	99	
85421	19	
86763	26	
88346	22	
89220	12	
90055	12	
90734	8	

B 95067 M.L.D.

D3501-1 Bushing Manufactured No 220 Each 171.0000

Location	Loc Qty	Loc Code
ST043	171	
74866	11	
86913	160	

B 88532 M.L.D.

13/05/27

January-02-13 11:50:14 AM

Shop Packet Print

Page 2

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY									
Landing Gear			General						
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain	<input type="checkbox"/> Ovalized	<input type="checkbox"/> Pressure/Forced					
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware	<input type="checkbox"/> Over/Under tolerance	<input type="checkbox"/> Temperature/Cure					
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Part Incorrect	<input type="checkbox"/> Weld					
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Part Lost/Missing	<input type="checkbox"/> Wrong Stock Pulled					
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Part Moved						
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Positioned Wrong						
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread	<input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Other					
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset							
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration							
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence							
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions							

Picklist Print

January-02-13 11:50:14 AM

Page 3

Work Order ID: 95010

Parent Item: D350-748-201

Parent Item Name: Crosstube Installation, High Aft

Start Date: 1/21/13

Required Date: 1/21/13

Start Qty: 1.00

Required Qty: 1.00

D3502-1 Manufactured No
Support

200 Each 79.0000

2

2

AP 13-5-22

Location

Loc Qty

Loc Code

LG050

7

77041

7

LG051

72

73419

3

74873

1

86876

44

88465

24

D350-748-241TRN
Crosstube Turning Detail

Manufactured No

110 Each 2.0000

1

1

DP 13-3-7

Location

Loc Qty

Loc Code

LG014

2

79392

1

86988

1

D3595-063-395
RUBBER CUSHION

Manufactured No

200 Each 34.0000

2

2

AP 13-5-22

Location

Loc Qty

Loc Code

FG

5

87353

5

LG051

29

87353

17

88333

12

January-02-13 11:50:14 AM

Shop Packet Print

Page 3

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
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Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
---	---	---

<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	
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Picklist Print

January-02-13 11:50:14 AM

Page 4

Work Order ID: 95010

Parent Item: D350-748-201

Parent Item Name: Crosstube Installation, High Aft

Start Date: 1/21/13

Required Date: 1/21/13

Start Qty: 1.00

Required Qty: 1.00

MS21042L4

Purchased

No

220

Each

5,091.0000

24

24

Nut

SJ

Location

Loc Qty

Loc Code

FP001

318

122452

306

8182

12

FP-001

12

8182

12

GA

231

121444

231

ST314

3030

119017

20

123021

510

123248

900

123355

1600

ST506

1500

123900

1500

125535

M.I.D.

MS21042L5

Purchased

No

220

Each

1,426.0000

4

4

Nut

SJ

Location

Loc Qty

Loc Code

ST314

726

108827

4

116105

1

116548

43

119109

20

121652

16

122452

630

2937

12

ST506

700

123900

700

123900

M.I.D.

January-02-13 11:50:14 AM

Shop Packet Print

13/05/27

Page 4

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>						
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Equip/Tooling <input type="checkbox"/>												
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Setup <input type="checkbox"/>												
Other <input type="checkbox"/>												
Process <input type="checkbox"/>												
Supplier <input type="checkbox"/>												
Training <input type="checkbox"/>												
Unapproved <input type="checkbox"/>												
FAULT CATEGORY												
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

Picklist Print

January-02-13 11:50:14 AM

Page 5

Work Order ID: 95010

Parent Item: D350-748-201

Parent Item Name: Crosstube Installation, High Aft

Start Date: 1/21/13

Required Date: 1/21/13

Start Qty: 1.00

Required Qty: 1.00

MS21920-22

Purchased

No

200

Each

56.0000

2

2

Clamp(per MIL-DTL-8783C)

125487

Location

Loc Qty

Loc Code

LG050

56

116207

7

117506

1

118186

8

119545

1

120631

3

122838

36

②

AB 13-5-22

MS27039-1-10

Purchased

No

200

Each

307.0000

1

1

Screw

124326

Location

Loc Qty

Loc Code

GA

100

120449

100

ST305

207

122815

207

①

AB 13-5-22

January-02-13 11:50:14 AM

Shop Packet Print

Page 5

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Skid-tube <input type="checkbox"/></td> <td style="width: 33%;">Crosstube <input type="checkbox"/></td> <td style="width: 33%;">Water Jet <input type="checkbox"/></td> <td style="width: 33%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
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Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

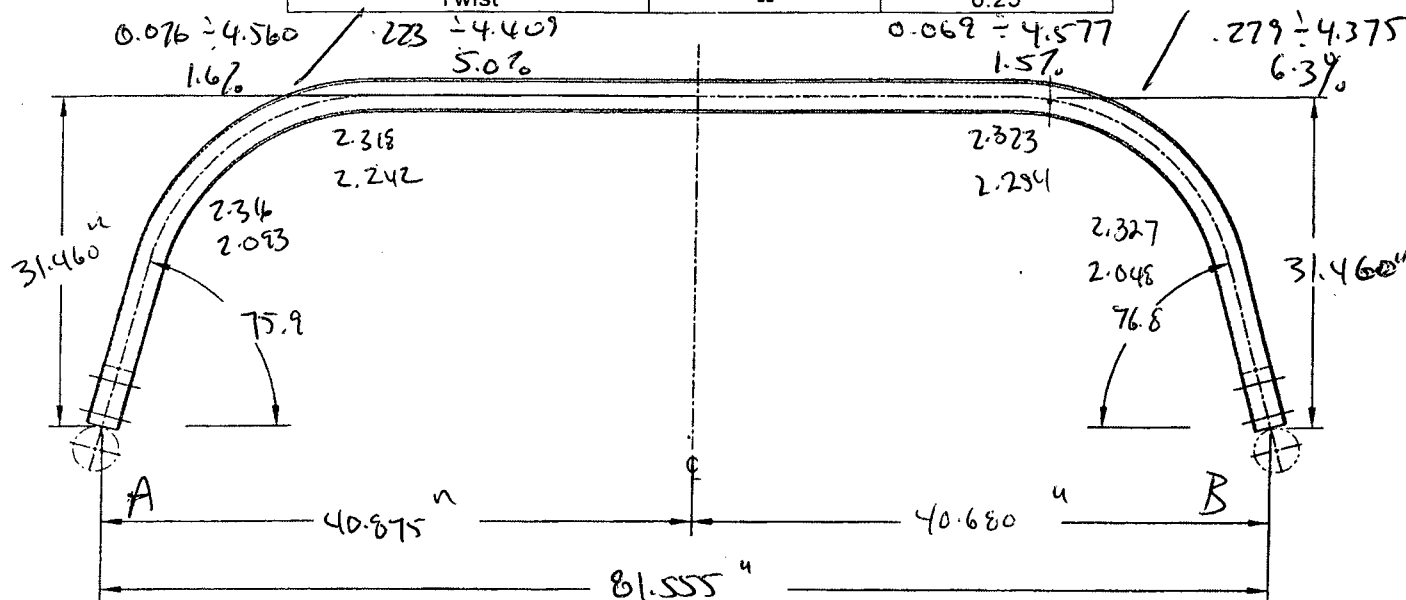
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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DART AEROSPACE LTD		Work Order:	95010
Description: Crosstube High Aft (AS350/355)		Part Number:	D350-748-201
Inspection Dwg: D350-748-241	Rev: <i>16</i>	Page 1 of 1	

Required Dimension	Min	Max
Height	31.22	31.48
1/2 Span	40.77	41.03
Angle	75	77
Total Span	81.54	82.06
Bending Passes	7	--
Crushing	--	6%
Twist	--	0.25



	Side A	Side B
Bending Passes		
Crushing		
Comments		
Side A = 1.6% at top + 5.0% at Bottom.		
Side B = 1.5% at top + 6.3% at Bottom.		
cut end @ 31.460" height.		

OK
UP 13/3/13

QC15 Inspection	<i>S</i>
Date	13/3/13

Rev	Date	Change	Revised by	Approved
A	07.02.06	New Issue	KJ/JM	
B	10.08.23	Dwg Rev updated	KJ	
C	12.04.16	Added bending, crushing & twist dimensions	KJ	
D	12.07.31	Dwg Rev updated	KJ	

Item	Qty -241	Part Number	Description
1	X	D350-748-241	CROSSTUBE ASSEMBLY (AS 350/355 HI AFT)
2	1	D6015-125	CROSSTUBE (OR D6018-125)
3	2	D3502-1	SUPPORT
4	2	D3595-063-395	RUBBER CUSHION
5	1	AELS-1032-225	INSERT
6	1	NAS1149D0363J	WASHER (OR AN960JD10)
7	2	MS21920-22 OR MS21920-21	CLAMP (PER DART SPEC. M-MS21920-21/-22)
8	1	MS27039-1-10	SCREW
9	A/R	PROSEAL 890 B-2	SEALANT, AMS-S-8802 CLASS B-2

GENERAL NOTES:

- 1) MATERIAL: MANUFACTURED FROM D6015-125 OR D6018-125
FINISHED LENGTH AFTER TURNING = 124.70±0.06 (AFTER BENDING/TRIMMING = 122.70 REF)
- 2) FINISH: MAGNETIC PARTICLE INSPECT PER DART QSI 038 4.2
CADMIUM PLATE PER AMS-QQ-P-416B, CLASS 1, TYPE II
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2
PAINT OUTSIDE PER DART QSI 005 4.2
- 3) TOLERANCE: PER DART QSI 018 UNLESS OTHERWISE NOTED.
WALL THICKNESS ECCENTRICITY PER DART QSI 038 7.2
MIN. ALLOWABLE WALL IS -0.020 FROM NOMINAL
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED.
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX.
- 6) IDENTIFICATION: DART PART NUMBER "D350-748-241" AND BATCH NUMBER ON INSIDE OF CUFF
PER DART QSI 044 6.4 (VIBRATING STYLUS)
- 7) WEIGHT: 29.85 lbs
- 8) PART IS SYMMETRIC ABOUT CENTERLINE, EXCEPT FOR Ø0.297 HOLE.
- 9) EXTREME CARE MUST BE TAKEN TO PROTECT THE OUTSIDE SURFACE OF THE TUBE. THE OUTSIDE SURFACE MUST BE SMOOTH AND FREE FROM SURFACE DEFECTS SUCH AS SCRATCHES, NICKS, OR DENTS. DEFECTS UP TO 0.005" MAY BE BLENDED OUT LONGITUDINALLY. CIRCUMFERENTIAL GRIND MARKS ARE UNACCEPTABLE. WHEN DRILLING HOLES EXTREME CARE MUST BE TAKEN AND CAREFUL DEBURRING PERFORMED TO ENSURE A CLEAN HOLE WITH NO CRACKING/CHIPPING/GROOVES.

TURNING

- 10) BLEND OUT ALL EDGES FROM MACHINING LONGITUDINALLY, TRANSITION SHOULD BE SMOOTH. NOTE: ALL HOLES ARE DRILLED AFTER BENDING.
- 11) HEAT TREAT TO MIN. 180 KSI PER MIL-T-6736 OR AMS2759/1E AFTER TURNING. ACCEPTABLE TO VERIFY TENSILE STRENGTH BY HARDNESS TEST PER ASTM E18 TO 40-45 HRC.

BENDING

- 12) ALL DIMENSIONS FOR BENT TUBE ARE POST STRESS RELIEF
- 13) BEND PROGRESSIVELY WITH A MINIMUM OF 7 PASSES PER SIDE. MAXIMUM TUBE FLATTENING DUE TO BENDING IS 6% BASED ON O.D. ON TOP HALF OF BEND, AND 7% ON BOTTOM HALF OF BEND.
- 14) MAX AMPLITUDE OF RIBBLING ALONG BENT PORTION OF THE TUBE IS 0.030 (ZN A1-3)
- 15) AFTER BENDING, STRESS RELIEVE TUBE AT 650°F ±0.25°F FOR A MINIMUM OF 2 HRS AND ALLOW TO COOL TO AMBIENT TEMPERATURE (REF AMS2759/1E).
- 16) MAX TWIST AFTER STRESS RELIEF: WITH XTUBE LAYED FLAT ON SURFACE, THE DIFFERENCE BETWEEN CUFF HEIGHTS FROM THE SURFACE MAY BE NO LARGER THAN 0.38 (ZN C1-3).

ASSEMBLY

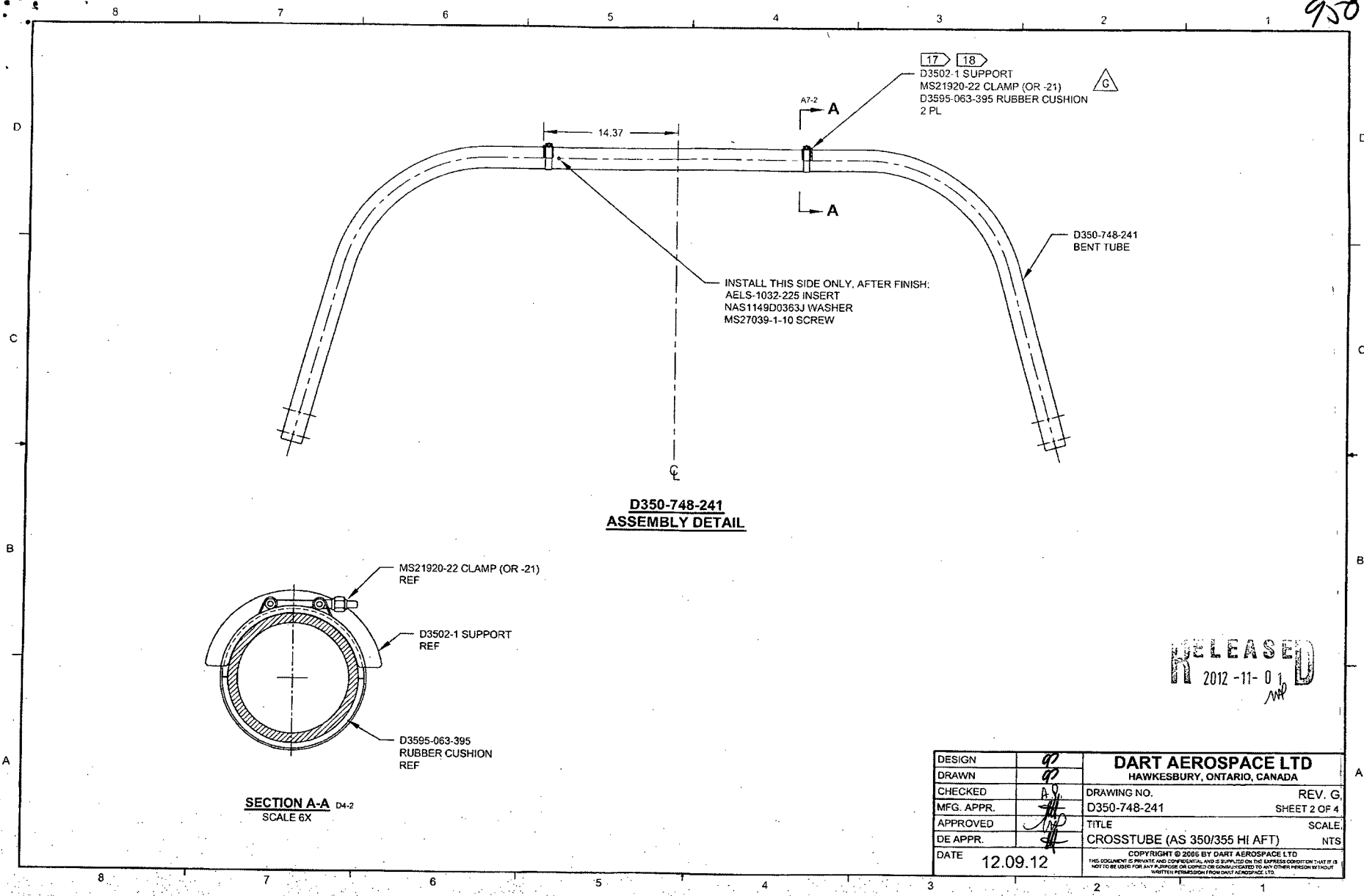
- 17) TO INSTALL D3502-1 SUPPORT: ABRASE MATING SURFACE OF SUPPORT AND CROSSTUBE WITH 180-GRIT SANDPAPER AND REMOVE RESIDUE WITH MEK (OR EQUIVALENT). APPLY A 0.02" TO 0.05" THICK LAYER OF PROSEAL 890 CLASS B-2 (OR AMS-S-8802 CLASS B-2) SEALANT TO MATING SURFACE OF SUPPORT.
- 18) TORQUE CLAMPS 60 TO 80 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING. PRIOR TO PACKAGING, RE-CHECK TORQUE ON CLAMPS AFTER PROSEAL 890 SEALANT HAS CURED FOR 72 HOURS.

SECRET
RECEIVED
UNCLASSIFIED
CONFIDENTIAL COPY
SUBJECT TO DOCUMENT
WORKING
950.10 ML3
13-01-03

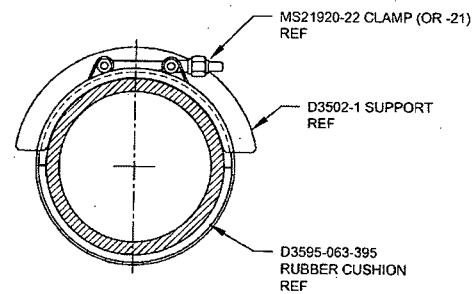
RELEASED
2012-11-01

G	RMV ABRASION STRIP, SUPPORT NOW W/ PROSEAL & CUSHION, ADD STRESS RELIEF, LONGER CUFF, NOW TRIM'D AFTER BEND, ADD WALL DIMS & UPDATE TOL.	CP	12.09.12
F	ADD HRC TEST OPTION (B8-1) PER PAR 09-040, ADD TWIST LIMIT (A8-1, C1-3), ADD D6015-125 OPTION (C8-1), STOCK DIM NOW MACHINED (D1-4)	CP	10.11.23
E	REVISE GENERAL NOTES: UPDATE TO CURRENT STANDARDS; RELOCATED FLAG #6 PER PAR 08-046 (ZN A8-3); ADD TOLERANCES (ZN C6-3, D2-3)	RF	09.09.30
D	MAG. PARTICLE AND CAD PLATE AS MFD.	CP	06.10.31
C	ADD CAD PLATING	CP	06.08.14
B	ADD D6018-125 & PRIME AND PAINT	CP	06.06.30
A	NEW ISSUE	CP	06.03.31
REV.	DESCRIPTION	BY	DATE
DESIGN	q		
DRAWN	q		
CHECKED	A.R.		
MFG. APPR.			
APPROVED			
DE APPR.			
DATE	12.09.12		
DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA DRAWING NO. D350-748-241 SHEET 1 OF 4 TITLE CROSSTUBE (AS 350/355 HI AFT) SCALE NTS REV. G DATE 12.09.12 <small>COPYRIGHT © 2006 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small>			

95010



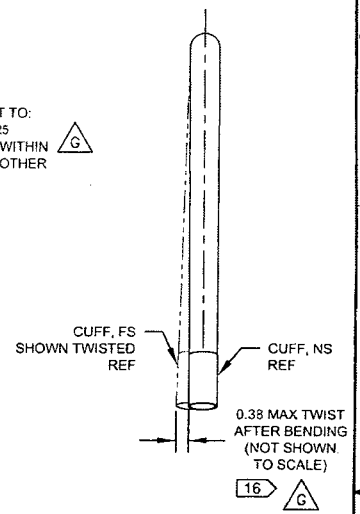
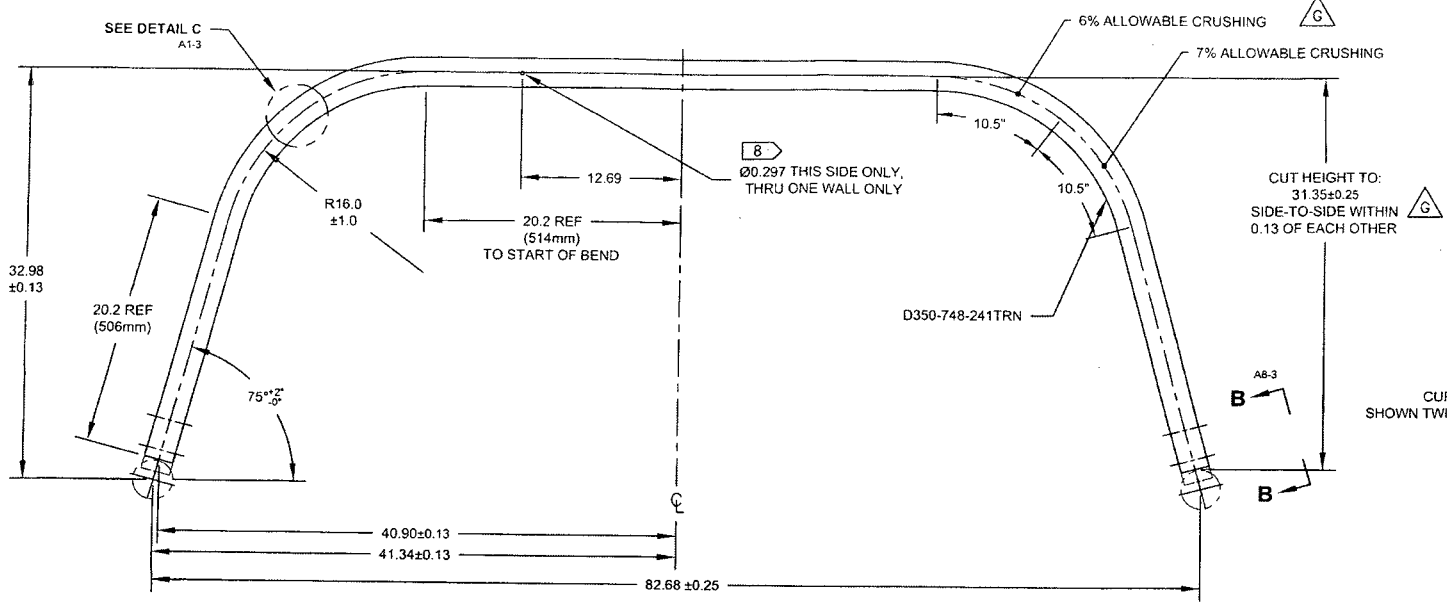
**D350-748-241
ASSEMBLY DETAIL**



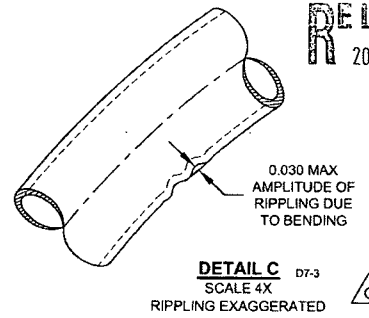
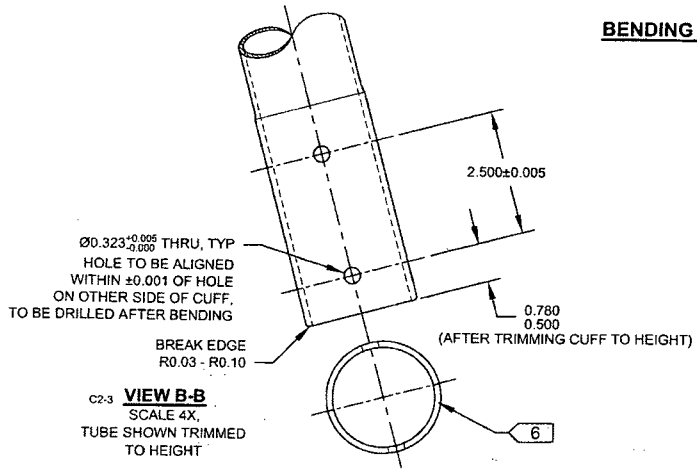
RELEASED
2012-11-01

DESIGN	90	DART AEROSPACE LTD	
DRAWN	90	HAWKESBURY, ONTARIO, CANADA	
CHECKED	A.S.	DRAWING NO.	REV. G.
MFG. APPR.	[Signature]	D350-748-241	SHEET 2 OF 4
APPROVED	[Signature]	TITLE	SCALE
DE APPR.	[Signature]	CROSSTUBE (AS 350/355 HI AFT)	NTS
DATE	12.09.12	<small>COPYRIGHT © 2006 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD</small>	

95010

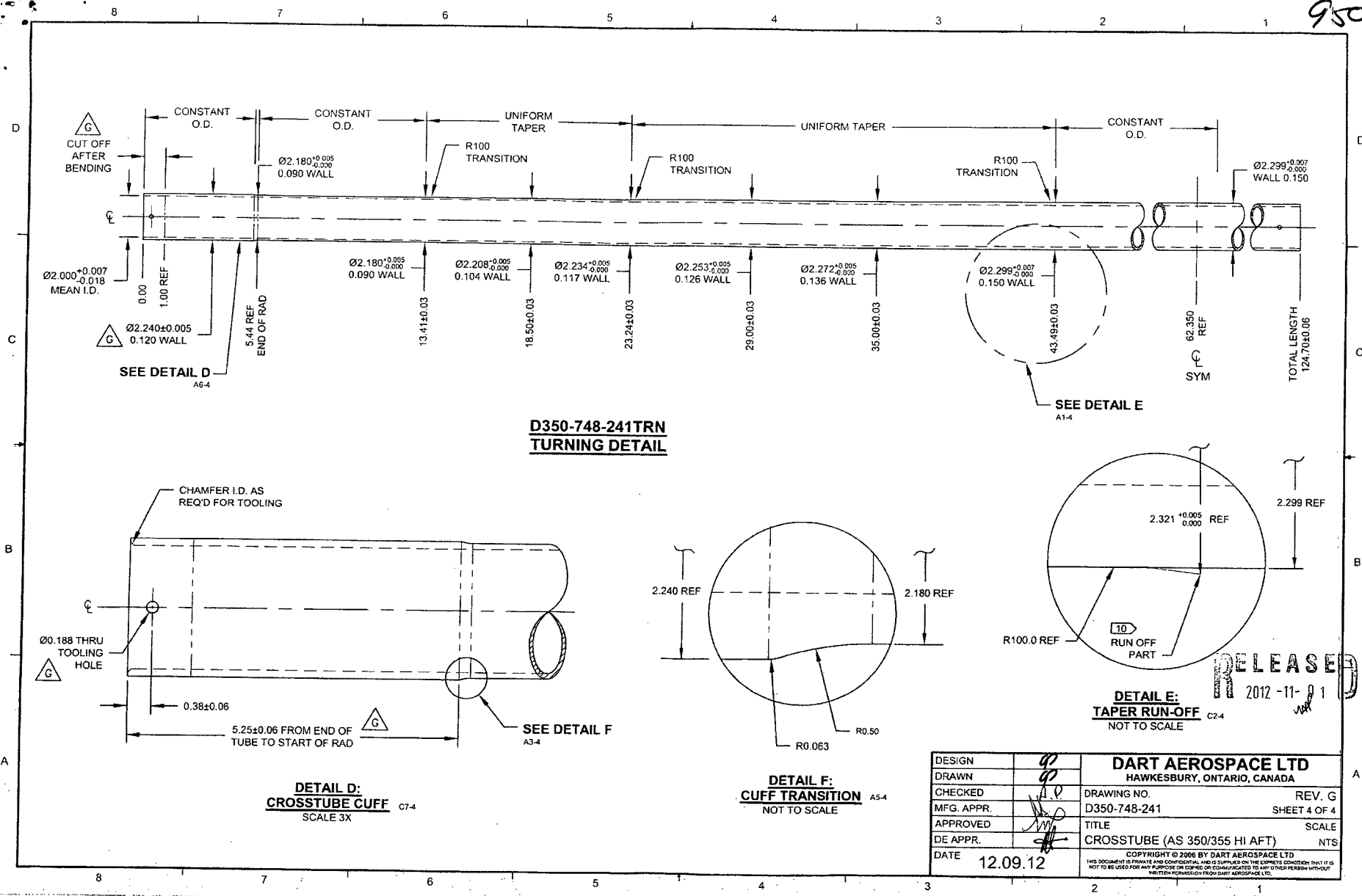


**D350-748-241
BENDING AND DRILLING DETAIL** 10



DESIGN	90	DART AEROSPACE LTD	
DRAWN	90	HAWKESBURY, ONTARIO, CANADA	
CHECKED	A.P.	DRAWING NO.	REV. G
MFG. APPR.		D350-748-241	SHEET 3 OF 4
APPROVED		TITLE	SCALE
DE APPR.		CROSSTUBE (AS 350/355 HI AFT)	NTS
DATE	12.09.12	COPYRIGHT © 2006 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR FOR CONSTRUCTION TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	

95010

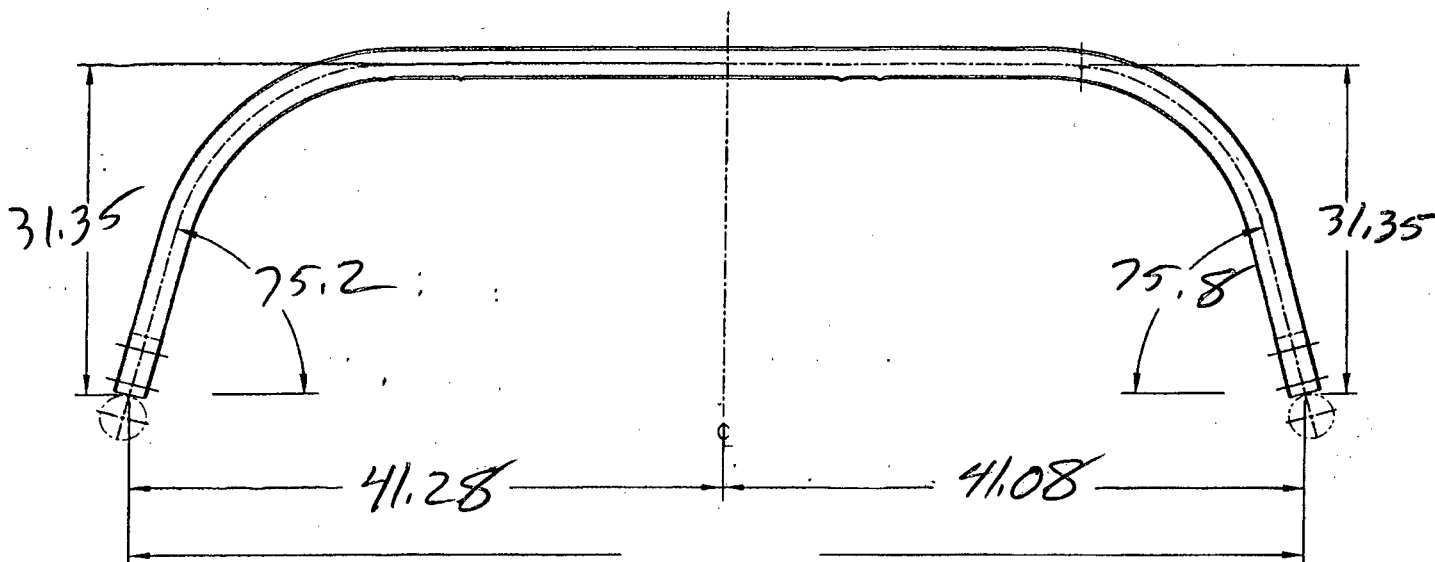


RELEASED
2012-11-01

Measured Before Dr-Stress

DART AEROSPACE LTD	Work Order: 95010
Description: Crosstube High Aft (AS350/355)	Part Number: D350-748-201
Inspection Dwg: D350-748-241 Rev: G	Page 1 of 1

Required Dimension	Min	Max
Height	31.22	31.48
1/2 Span	40.77	41.03
Angle	75	77
Total Span	81.54	82.06
Bending Passes	7	--
Crushing	--	6%
Twist	--	0.25



	Side A	Side B
Bending Passes	37	39
Crushing		
Comments		
TWIST 0.001		

13-3-7

QC15 Inspection	
Date	

Rev	Date	Change	Revised by	Approved
A	07.02.06	New Issue	KJ/JM	
B	10.08.23	Dwg Rev updated	KJ	
C	12.04.16	Added bending, crushing & twist dimensions	KJ	
D	12.07.31	Dwg Rev updated	KJ	
E	13.02.27	Dwg Rev updated	KJ	

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
---	---	--



METCOR INC.

560 BOUL. ARTHUR-SAUVÉ
ST-EUSTACHE, QC, J7R 5A8

Tel.: 450 473-1884 / Téléc. / Fax : 450 491-5498

Certificat de Conformité

Certificate of Compliance

BON DE TRAVAIL order	CHARGEMENT load
184419	1

CLIENT / customer 215

DART AEROSPACE
1270 ABERDEEN
HAWKESBURY

ON K6A 1K7

LIVRÉ À / shipped to:

DART AEROSPACE
1270 ABERDEEN
HAWKESBURY

ON K6A 1K7

QUANTITÉ quantity	POIDS weight	DESCRIPTION DES PIÈCES parts description
7	210	D350-748-101 CROSSTUBE (1) CROSSTUBE REFERENCE 97065 (1) D350-748-201 CROSSTUBE REFERENCE 97068 (1) D350-748-201 CROSSTUBE REFERENCE 95003 (1) D350-748-201 CROSSTUBE REFERENCE 95004 (1) D350-748-201 CROSSTUBE REFERENCE 95005 (1) D350-748-201 CROSSTUBE REFERENCE 95009 (1) D350-748-201 CROSSTUBE REFERENCE 95010 CONTENANT; 1 NIL

COMMENTAIRES / comments

Le traitement thermique a été fait en utilisant des équipements en conformité avec la spécification demandée.
Toutes les opérations de traitement thermique ont été faites en conformité avec les requis de la spécification demandée et toutes les vérifications et les tests demandés ont été faites et documentés.
Aucun changement ou dérogation n'a été faite par rapport au traitement thermique demandé.
On certifie que le matériel a été fabriqué, échantillonné, testé et inspecté en accord avec les spécifications du matériel et le bon de commande et le matériel rencontre les exigences spécifiées.

All the heat treatment processing performed on this order was accomplished using heat treatment equipment compliant with



METCOR INC.

560 BOUL. ARTHUR-SAUVÉ
ST-EUSTACHE, QC, J7R 5A8

Tel.: 450 473-1884 / Téléc. / Fax : 450 491-5498

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BON DE TRAVAIL order	CHARGEMENT load
184419	1

CLIENT / customer 215

DART AEROSPACE
1270 ABERDEEN
HAWKESBURY

ON K6A 1K7

LIVRÉ À / shipped to:

DART AEROSPACE
1270 ABERDEEN
HAWKESBURY

ON K6A 1K7

All the heat treatment processing performed on this order was accomplished using heat treatment equipment compliant with the requested heat treatment specification.

All the heat treatment operations were accomplished in accordance with the requested/required heat treatment specification and all required verifications test have been performed and documented.

No unauthorized changes or deviations to required heat treatment specifications or procedures have been performed.

We certify that the material was manufactured, sampled, tested and inspected in accordance with the material specification and the purchase order and was found to meet the requirements.

CERTIFIÉ par / Certified by:

Isabel Gien

DATE: 2013-03-11



**CERTIFICATE OF
CONFORMANCE**

**CADORATH PLATING CO. LTD.
2150 LOGAN AVENUE
WINNIPEG, MANITOBA R2J-0J1**

DATE: Apr-08-2013

CONSIGNEE TO: Dart Aerospace Ltd.
1270 Aberdeen St.
Hawksbury, ON K6A 1K7

W/O #: 123430

INVOICE #: 65407

**CONTRACT OR
PURCHASE ORDER #** PO19388

DESCRIPTION: CROSSTUBE

P/N # D350-748-201

S/N # 95010

QTY

1

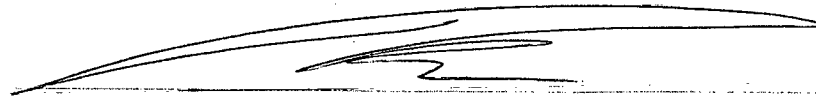
MPI IAW ASTM-E-1444. CADMIUM PLATING IAW AMS-QQ-P-416C
TYPE 2 YELLOW CLASS 1. FINAL MPI IAW ASTM-E-1444. BAKE
HEAT CHART # 13-286 AND # 13-307.

8/13/04/14

CERTIFICATE: I certify that the items indicated here on have
been inspected and tested and conform to all specifications
and requirements detailed on the contract or purchase order.

CI
22

Approved Inspector:





LIQUID PENETRANT TEST REPORT

P- 12166

CLIENT Dart Aerospace DATE April 15 2013 PAGE 1 OF 1
ATTENTION Offentake, Linda, Andy ACUREN JOB NO. 188-13-C0240 TIME AM ☒ PM ☐
ADDRESS 1270 Aberdeen St, PO/WO No. As Address
Hawkesbury, ON WORK LOCATION As Address
PROJECT Pt-Wet Fluorescent Liquid penetrant Inspection ACCEPTANCE STD. ASTM 1417/1010370 REV./DATE 2005
ITEM(S) EXAMINED -See Below

JOB DESCRIPTION PROCEDURE No. LT-002 REV./DATE 2009 TECHNIQUE No. LT-002 REV./DATE 2009
PART No. MATERIAL 4/s THICKNESS ---
SCOPE Performed a wet Fluor L.P.I. on 100% of the external surface only on
Items mentioned below

TEST DETAILS
METHOD ☒ FLUORESCENT ☐ VISIBLE ☒ WATER WASH ☐ SOLVENT REMOVABLE ☐ POST EMULSIFIED
FAMILY BRAND Megaflex BLACK LIGHT S/N 13790 ☐ OUTPUT > 1000 μ W/cm² ☐ AMBIENT < 2 fc
PENETRANT Z1-87 MINIMUM DWELL TIME 45 MIN. LIGHTING EQUIP. ☐ FLASHLIGHT ☐ TROUBLELIGHT ☐ OUTPUT > 100 fc @ SURFACE
PENETRANT REMOVER H₂O MINIMUM DRY TIME >10 MIN. OTHER ---
DEVELOPER ZP-9F MINIMUM DWELL TIME 30 MIN. LIGHT METER S/N 1092866 CAL DUE DATE oct 2013
DEVELOPER TYPE ☒ NON AQUEOUS ☐ AQUEOUS ☐ DRY

TEST SURFACE
SURFACE CONDITION ☐ AS GROUND ☐ AS WELDED ☒ MACHINED ☐ SHOT BLASTED ☒ CLEAN BARE METAL
SURFACE TEMPERATURE ☐ < -4°C/ 20°F ☐ -4°C/ 20°F TO 10°C/50°F ☒ 10°C/50°F TO 52°C/125°F ☐ > 52°C/125°F

RESULTS- (<input type="checkbox"/> METRIC <input type="checkbox"/> IMPERIAL)			
ITEM	COMMENTS	ACCEPT	REJECT
1	Cross tube inst, High Aft w.o ID 95008		X
2	Cross tube inst, High Aft w.o ID 95010		X
3	Cross tube inst, High Aft w.o ID 95011		X
4	Cross tube inst, High End w.o ID 95040		X
5	Cross tube inst, High End w.o ID 95042		X
6	Cross tube inst, High Aft w.o ID 97067		X
7	Cross tube inst, High Aft w.o ID 97068		X
Item ID D350-748-201 Indications			
Item ID D350-748-201 Indications			
Item ID D350-748-201 Indications			
Item ID D350-748-101 Indications			
Item ID D350-748-101 Indications			
Item ID D350-748-201 Indications			
Item ID D350-748-201 Indications			

Scope of Services
The agreement of Acuren Group Inc. to perform services extends only to those services provided for in writing. Under no circumstances shall such services extend beyond the performance of the requested services. It is expressly understood that all descriptions, comments and expressions of opinion reflect the opinions or observations of Acuren Group Inc. based on information and assumptions supplied by the owner/operator and are not intended nor can they be construed as representations or warranties. Acuren Group Inc. is not assuming any responsibilities of the owner/operator and the owner/operator retains complete responsibility for the engineering, manufacture, repair and use decisions as a result of the data or other information provided by Acuren Group Inc. In no event shall Acuren Group Inc.'s liability in respect of the services referred to herein exceed the amount paid for such services.
Standard of Care
In performing the services provided, Acuren Group Inc. uses the degree, care and skill ordinarily exercised under similar circumstances by others performing such services in the same or similar locality. No other warranty, expressed or implied, is made or intended by Acuren Group Inc.

SIGNATURES
CLIENT REPRESENTATIVE Andy Sheldon DTR # E-120399
TECHNICIAN (SIGNATURE): Alexandre Michaud SIGNATURE
NAME (PRINT): Alexandre Michaud REPORT REVIEWED BY:
1ST TECHNICIAN 2ND TECHNICIAN
CGSB LEVEL 2 SNT LEVEL 2 CGSB LEVEL SNT LEVEL
CGSB REG. No 10148 CGSB REG. No

WHITE - CLIENT COPY

CANARY - OFFICE COPY

PINK - TECHNICIAN COPY

GOLD - OFFICE COPY



LIQUID PENETRANT TEST REPORT

P- 12169

CLIENT

Dart Aerospace
Chantelle, Linda, Andy
1270 Aberdeen St
Hawkesbury, on

DATE

April 25 2013

PAGE 1 OF 1

ATTENTION

ACUREN JOB NO.

127-13-00246

TIME AM ☐ PM ☒

ADDRESS

PO/VO NO.

WORK LOCATION

As Address

PROJECT

ACCEPTANCE STD.

ASTM A17/05/03

REV./DATE 2005

ITEM(S) EXAMINED

Pt-wet Fluorescent Liquid penetrant inspection
- See Below

JOB DESCRIPTION

PROCEDURE NO. LT-002 REV./DATE 2007

TECHNIQUE NO. LT-002 REV./DATE 2007

PART NO.

MATERIAL

C/S

THICKNESS

SCOPE

Performed wet Flu L.P.I. on 100% of the external surface only on items mentioned below

TEST DETAILS

METHOD

☒ FLUORESCENT

☐ VISIBLE

☒ WATER WASH

☐ SOLVENT REMOVABLE

☐ POST EMULSIFIED

FAMILY BRAND

Magnaflux

BLACK LIGHT S/N 13790

☐ OUTPUT > 1000 μ W/cm²

☐ AMBIENT < 2 fc

PENETRANT

2K-67

MINIMUM DWELL TIME 45 MIN.

LIGHTING EQUIP.

☐ FLASHLIGHT

☐ TROUBLELIGHT

☐ OUTPUT > 100 fc @ SURFACE

PENETRANT REMOVER

H2O

MINIMUM DRY TIME > 10 MIN.

OTHER

DEVELOPER

2P-7F

MINIMUM DWELL TIME 30 MIN.

LIGHT METER S/N 1098866

CAL DUE DATE at 2013

DEVELOPER TYPE

☒ NON AQUEOUS

☐ AQUEOUS

☐ DRY

TEST SURFACE

SURFACE CONDITION

☐ AS GROUND

☐ AS WELDED

☒ MACHINED

☐ SHOT BLASTED

☐ CLEAN BARE METAL

SURFACE TEMPERATURE

☐ < -4°C/ 20°F

☐ -4°C/ 20°F TO 10°C/50°F

☒ 10°C/50°F TO 52°C/125°F

☐ > 52°C/125°F

RESULTS-

(☐ METRIC ☐ IMPERIAL)

ITEM

COMMENTS

ACCEPT

REJECT

1	Crosshole ins, High Alt w/o ID 95007	X	
2	Crosshole ins, High Alt w/o ID 95012	X	
3	Crosshole ins, High Fwd w/o ID 95041	X	
4	Crosshole ins, High Fwd w/o ID 95049	X	
5	Crosshole ins, High Fwd w/o ID 97117	X	

Item ID 0350-748-201 Indications
Item ID 0350-748-201 Indications
Item ID 0350-748-101 Indications
Item ID 0350-748-101 Indications
Item ID 0350-748-101 Indications

After stripping / removal of cad still find some indication but less with the cad on still have some rough surface and indications need to be buff and reinspect.

Scope of Services

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Standard of Care

In performing the services provided, Acuren Group Inc. uses the degree, care and skill ordinarily exercised under similar circumstances by others performing such services in the same or similar locality. No other warranty, expressed or implied, is made or intended by Acuren Group Inc.

SIGNATURES

CLIENT REPRESENTATIVE

Matthew Murdoch
PRINT

Matthew Murdoch
SIGNATURE

DTR # E-01991

TECHNICIAN (SIGNATURE):

Alexandre Michaud

NAME (PRINT):

Alexandre Michaud
1ST TECHNICIAN

2ND TECHNICIAN

CGSB LEVEL

2 SNT LEVEL 2

CGSB LEVEL

SNT LEVEL

CGSB REG. NO

10141

CGSB REG. NO

REPORT

REVIEWED BY:

NAME

INITIALS

WHITE - CLIENT COPY

CANARY - OFFICE COPY

PINK - TECHNICIAN COPY

GOLD - OFFICE COPY

**CERTIFICATE OF
CONFORMANCE**

**CADORATH PLATING CO. LTD.
2150 LOGAN AVENUE
WINNIPEG, MANITOBA R2J-0J1**

DATE: May-13-2013

CONSIGNEE TO: Dart Aerospace Ltd.
1270 Aberdeen St.
Hawksbury, ON K6A 1K7

W/O #: 124601
INVOICE #: 65948

**CONTRACT OR
PURCHASE ORDER #** PO19783

DESCRIPTION: CROSSTUBE

QTY 1

P/N # D350-748-201

S/N # 95010

STRIP IAW MIL-STD-871. CADMIUM PLATING IAW AMS-QQ-P-416C
TYPE 2 YELLOW CLASS 1. MPI IAW ASTM-E-1444. BAKE HEAT
CHART # 13-415 AND # 13-428.

CERTIFICATE: I certify that the items indicated here on have
been inspected and tested and conform to all specifications
and requirements detailed on the contract or purchase order.



Approved Inspector:

A handwritten signature in black ink, consisting of several horizontal strokes and a loop.



LIQUID PENETRANT TEST REPORT

P- 09103

CLIENT: DART AeroSpace DATE: MAY 17/13 PAGE 1 OF 1
ATTENTION: ANDY SHELTON ACUREN JOB NO: 188-13-C0098 TIME AM ☒ PM ☐
ADDRESS: 1220 ABERDEEN ST. PO/WO NO: 19926-
HAVERHILL MA 01830 WORK LOCATION: SAME
ACCEPTANCE STD: ASTM 1417/Q1-03B REV./DATE: 2005
PROJECT: F.P.I. ON CROSSTUBES
ITEM(S) EXAMINED: (10)

JOB DESCRIPTION: SEE RESULTS PROCEDURE NO. LT-002 REV./DATE: 2008 TECHNIQUE NO. LT-002 REV./DATE: 2008
PART NO.: SEE RESULTS MATERIAL: STEEL THICKNESS: VARIABLE
SCOPE: A WET FLUORESCENT INSPECTION WAS CARRIED OUT ON THE SURFACE ONLY 100% WITH (DYE)

TEST DETAILS

METHOD: ☒ FLUORESCENT ☐ VISIBLE ☒ WATER WASH ☐ SOLVENT REMOVABLE ☐ POST EMULSIFIED
FAMILY BRAND: MAGNAFLUX BLACK LIGHT S/N: 16459 ☐ OUTPUT > 1000 μ W/cm² ☐ AMBIENT < 2 fc
PENETRANT: 2LG7 MINIMUM DWELL TIME: 10 MIN. LIGHTING EQUIP.: ☐ FLASHLIGHT ☐ TROUBLELIGHT ☒ OUTPUT > 100 fc @ SURFACE
PENETRANT REMOVER: H2O MINIMUM DRY TIME: >10 MIN. OTHER:
DEVELOPER: SKD 12 MINIMUM DWELL TIME: 10 MIN. LIGHT METER S/N: CAL DUE DATE:
DEVELOPER TYPE: ☒ NON AQUEOUS ☐ AQUEOUS ☐ DRY

TEST SURFACE

SURFACE CONDITION: ☐ AS GROUND ☐ AS WELDED ☒ MACHINED ☐ SHOT BLASTED ☒ CLEAN BARE METAL
SURFACE TEMPERATURE: ☐ < -4°C/20°F ☐ -4°C/20°F TO 10°C/50°F ☒ 10°C/50°F TO 52°C/125°F ☐ > 52°C/125°F

RESULTS-

☒ METRIC ☐ IMPERIAL

ITEM	COMMENTS	ACCEPT	REJECT
	CROSSTUBE - W.O. #		
1	" " 97119	/	
1	" " 95011	/	
1	" " 95003		X
1	" " 97065	/	
1	" " 95010	/	
1	" " 97067	/	
1	" " 95009	/	
1	" " 95041	/	
1	" " 97068	/	
1	" " 95004	/	

Scope of Services
The agreement of Acuren Group Inc. to perform services extends only to those services provided for in writing. Under no circumstances shall such services extend beyond the performance of the requested services. It is expressly understood that all descriptions, comments and expressions of opinion reflect the opinions or observations of Acuren Group Inc. based on information and assumptions supplied by the owner/operator and are not intended nor can they be construed as representations or warranties. Acuren Group Inc. is not assuming any responsibilities of the owner/operator and the owner/operator retains complete responsibility for the engineering, manufacture, repair and use decisions as a result of the data or other information provided by Acuren Group Inc. In no event shall Acuren Group Inc.'s liability in respect of the services referred to herein exceed the amount paid for such services.

Standard of Care
In performing the services provided, Acuren Group Inc. uses the degree, care and skill ordinarily exercised under similar circumstances by others performing such services in the same or similar locality. No other warranty, expressed or implied, is made or intended by Acuren Group Inc.

SIGNATURES

CLIENT REPRESENTATIVE: Andy Sheldon PRINT SIGNATURE: ASheldon DTR # E-02100
TECHNICIAN (SIGNATURE): Mike Johnson REPORT REVIEWED BY:
NAME (PRINT): Mike Johnson 1ST TECHNICIAN 2ND TECHNICIAN
CGSB LEVEL: 2 SNT LEVEL: CGSB LEVEL: SNT LEVEL:
CGSB REG. NO: 06006 CGSB REG. NO:

WHITE - CLIENT COPY

CANARY - OFFICE COPY

PINK - TECHNICIAN COPY

GOLD - OFFICE COPY

PT Sept 2005

Work Order ID 95010

95010

Page 1

January-02-13 11:50:14 AM

Item ID: D350-748-201

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Crosstube Installation, High Aft

Start Date: 1/21/13 Start Qty: 1.00

1

Cust Item ID:

Required Date: 1/21/13 Req'd Qty: 1.00

1

Customer:

Reference:

Run Start *NR1*

Approvals: Process Plan: *MLS*

Date: 13 01 03 Tooling:

Date:

Stop *NR2*

QC:

Date: SPC (Y/N):

Date:

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

Draw Nbr

Revision Nbr

D350-748-241

G

100

0.00

100

DOCUMENT CONTROL

DC

Memo

0.00

Document Control

Photocopy bluefile & type labels per PPPD350-748-201

CHG003

110

0.00

110

BENDING MACHINE - CROSSTUBES

CNC Bend 2

Memo

0.00

CNC Alpha 160 Bender

Bend tube as per Dwg D350-748-241 using CNC bender program D350A and Folio FT

*****UNDER BEND .225" PER SIDE*****

****USE (4) DT9824 SHIM BLOC TO CHECK STRAIGHTNESS****

MLS 13-05-28

DD 13-3-7